

*Community Aids* #48

*(Financial Assistance to Counties for Human Services)*

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# *Community Aids*

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# Community Aids

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## Introduction

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Community aids are state and federal funds which are distributed by the Department of Health and Family Services (DHFS) to counties for the provision of human services in two broad, statutorily-defined functional areas: (1) social services for low-income persons and children in need of protection and services; and (2) services for persons with needs relating to mental illness, substance abuse or developmental disabilities. Although these two broad functional areas are authorized by separate statutory provisions and are frequently administered at the county level by separate agencies, these functions are considered to be related components of a coordinated state/local human services system.

In the 1999-01 biennium, a total of \$596.0 million (all funds) is budgeted for community aids. Of this amount, \$371.4 million is provided from state general purpose revenues (GPR) and \$224.6 million is budgeted with federal revenues (FED) from a variety of sources. Community aids comprise the largest source of state aids to counties. In calendar year 2000, counties received \$304.9 million in community aids. By comparison, state shared revenue aids to counties totaled \$189.7 million in that year.

Community aids are allocated to counties on a calendar year basis under a basic county allocation and five separate, categorical allocations. In the 1999-01 biennium, the basic county allocation represents approximately 93% of funds allocated to counties under the community aids program; these funds may be spent for any eligible community aids service.

The state's human services programs funded through community aids are state-supervised and county-administered. Although counties have assumed increasing responsibility for the delivery of human services, the need for state monitoring has reflected the large proportion of GPR and federal funding utilized for these programs. Counties are also required to provide matching funds and, in most cases, provide revenues in addition to these matching amounts to support their human services programs.

The term "human services" refers to a broad array of services provided to persons in need, including income maintenance payments and assistance with health care costs. Human services supported by community aids funding include: (a) crisis respite child care; (b) community living/support services, such as daily living skills training, respite care, home-delivered and congregate meals; (c) work-related and day services; (d) community residential services, such as foster home care, adult family home care, shelter care and community-based residential facilities; (e) community treatment services, including juvenile probation, supervision, reintegration and aftercare; (f) supported employment; (g) supportive home care services; (h) community prevention, access and outreach; (i) transportation; and (j) some inpatient and institutional care.

Other human service programs, such as services provided under Wisconsin Works (W-2), the county relief block grant, medical assistance, youth aids and the community options program are separately funded and described in other informational papers prepared by the Legislative Fiscal Bureau.

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## Background

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Prior to 1975, state and federal funding for mental health services, services for person with developmental disabilities, and substance abuse services was allocated to counties based on requests received from county boards. The 1975-77 biennial budget act instituted the allocation of funding for these services on a per capita basis due to wide variation in funding requests, and differing county perceptions of need. Allocations to counties for social services were based on prior year expenditures.

In 1978, due to concerns regarding the allocation of aids for community programs, the Department of Health and Social Services (now the Department of Health and Family Services) established a study committee to review alternative approaches to these aid programs. The study committee objectives were to: (a) reaffirm the state/county partnership in providing community services; (b) provide a funding increase for community human service programs that reflected the rate of inflation; (c) provide greater equity in distributing aids; (d) create no mandates without funding; and (e) provide continued funding for state-initiated special needs. The study committee's recommendations, which were incorporated into Chapter 34, Laws of 1979 (the 1979-81 biennial budget act), resulted in the creation of the community aids formula. This formula calculated each county's need for funding based on three factors: a need indicator, an urban-rural factor and an ability to pay factor.

The formula determined each county's need for funding on a more equitable basis than had been established at the time. It was never intended however, that the formula be used to redistribute the base level of funding which counties received. Instead, as implemented in county contracts beginning January 1, 1980, increases were appropriated for community aids and distributed to those counties whose actual level of funding was lower than

the level that those counties would have received if all funds were distributed based on the formula. Later distributions of increased funding for community aids also used the formula to target distributions to those counties which were underfunded relative to what they would have received, under a straight, formula-driven distribution of all community aids funds.

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## Funding Sources

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Community aids funds include appropriations of state, general purpose revenues (GPR) and federal funds that are combined and distributed through specific allocations. In the 1999-01 biennium, approximately 93% is distributed to counties in the form of a basic county allocation (BCA). The remainder of the funds are distributed as categorical allocations for specific purposes. Counties are required to provide matching funds to most of these allocations. Table 1 summarizes the funding sources available for allocation of community aids funds for the 1999-01 biennium.

State and federal expenditures for community aids for each of the past 22 years are presented in Appendix I.

### Federal Resources

A number of federal sources provide funding for community aids to counties. Four sources of funding authorized under the federal Social Security Act are distributed to counties through the BCA: (a) funding received for reimbursement of foster care expenses (Title IV-E); (b) the social service block grant (Title XX); (c) the temporary assistance to needy families (TANF) block grant (Title IV-A); and (d) funding for child welfare services (Title IV-B). These funds are not earmarked for specific purposes. Funds received from the substance abuse prevention and treatment block grant and the community mental health block grant are provided to counties as categorical

**Table 1: Community Aids Funding, By Source -- State Fiscal Years 1999-00 and 2000-01**

Funding Source	1999-00 Actual	2000-01 Estimate	Total	Percent of Total
GPR	\$175,393,200	\$195,965,700	\$371,358,900	62.3%
Federal:				
Title IV-E -- foster care	\$40,379,700	\$40,600,000	\$80,979,700	13.6
Social services block grant	29,697,100	29,700,000	59,397,100	10.0
TANF block grant*	31,800,000	18,000,000	49,800,000	8.4
Substance abuse block grant	10,493,600	11,300,000	21,793,600	3.7
Title IV-B -- child welfare	3,964,400	3,700,000	7,664,400	1.3
Community mental health block grant	<u>2,513,400</u>	<u>2,500,000</u>	<u>5,013,400</u>	<u>0.8</u>
Total Federal Funding	\$118,848,200	\$105,800,000	\$224,648,200	37.7%
Total Funding	\$294,241,400	\$301,765,700	\$596,007,100	100.0%

\*Federal TANF block grant funds are transferred from the Department of Workforce Development and budgeted in DHFS as program revenue.

allocations through community aids and are earmarked for specific purposes, as required by federal law. As shown in Figure 1, the portion of community aids funded from federal resources has increased significantly in the last ten years.

**Foster Care Reimbursement.** In 2000-01, it is estimated that \$40.6 million will be distributed to counties through the community aids BCA from reimbursements received under Title IV-E of the Social Security Act. Title IV-E provides funding for a portion of the cost of services for children who meet certain financial eligibility criteria and are placed in out-of-home care. This criteria is based on the criteria for AFDC eligibility as of July 16, 1996. The AFDC program was eliminated under the 1996 federal Personal Responsibility and Work Opportunity Act. However, the financial criteria is still used to determine IV-E eligibility.

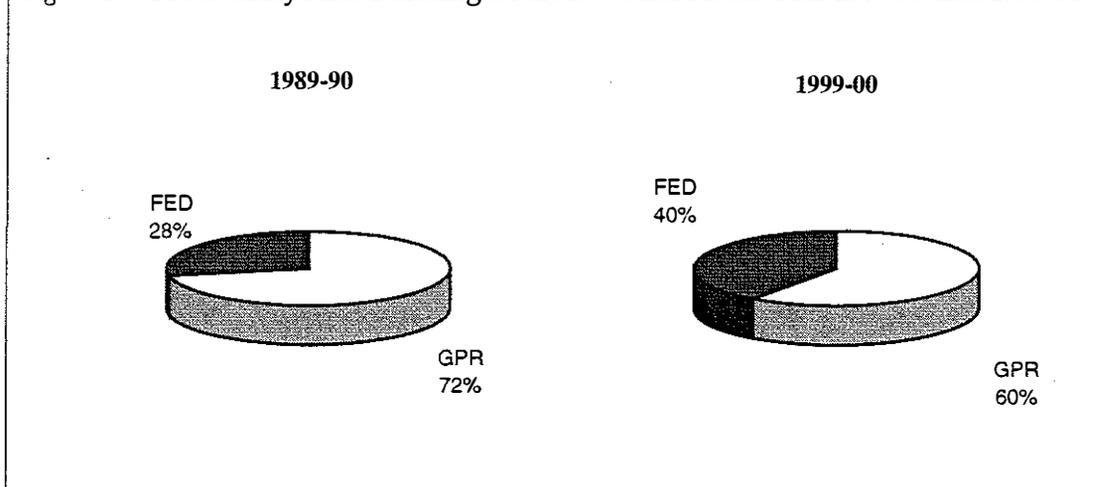
States are required to provide foster care maintenance payments to Title IV-E-eligible children if all of the following apply: (1) the removal of the child from his or her home and the foster care placement were based on a voluntary placement agreement signed by the child's parents

or guardians or a judicial determination that remaining in the home would be contrary to the child's welfare; (2) reasonable efforts were made to eliminate the need for removal or to return the child to his home; and (3) care and placement of the child are the responsibility of specified public agencies. The determination as to Title IV-E eligibility is made at the time the child leaves the home of his or her natural parents.

Title IV-E reimbursement is provided for 50% of administrative costs and placement services. Maintenance payments intended to cover the costs of food, shelter, clothing, daily supervision, child care, school supplies, general incidentals, liability insurance for the child and reasonable travel to the child's home for visits are reimbursed at the rate used for medical assistance reimbursement, approximately 59%. While certain requirements pertain to the earning of Title IV-E reimbursement, there are no federal requirements for the subsequent expenditure by states of these funds.

**Social Services Block Grant.** A major source of federal funding for human services is provided under the social services block grant -- Title XX of

Figure 1: Community Aids Funding Sources – State Fiscal Year 1989-90 and 1999-00



the Social Security Act. In 2000-01, \$29.7 million is estimated to be available from the social services block grant for distribution to counties through community aids.

The social service block grant is distributed to states on the basis of population to provide services directed toward at least one of five goals; (a) to prevent, reduce, or eliminate economic dependency; (b) to achieve or maintain self-sufficiency; (c) to prevent neglect, abuse, or exploitation of children and adults; (d) to prevent or reduce inappropriate institutional care; and (e) to secure admission or referral for institutional care when other forms of care are not appropriate. States may transfer up to 10% of their allotment for any fiscal year to preventive health and health services, alcohol and drug abuse services, mental health services, maternal and child health services, and low-income home energy assistance block grants. States can also use funds for staff training, administration, planning, implementing or administering the state's social service plan.

Social service block grant funds cannot, however, be used for: (a) medical care except family planning, rehabilitation and certain detoxification services; (b) the purchase of land, construction or major capital improvement; (c) most room and board expenses, except emergency

short-term services; (d) educational services generally provided by public schools; (e) most social services provided in and by employees of hospitals, nursing homes, and prisons; (f) cash payments for subsistence; (g) child day care services that do not meet state and local standards; and (h) wages to individuals as a social service, except wages of welfare recipients employed in child day care.

Although no state match is required for these funds, states must prepare a plan that assures that these funds will be expended for appropriate social services. Under the current state plan, child day care, specialized transportation services, community living and support services including family planning and supportive home care are identified as state priorities.

**TANF Block Grant Funds.** The temporary assistance to needy families (TANF) block grant was created by the 1996 federal Personal Responsibility and Work Opportunity Act (PRWOA) as a replacement to the AFDC program. A state may use up to 10% of its block grant allocation consistent with the requirements of the social services block grant. PRWOA specifies that any funds used in this manner are subject to the federal social service block grant requirements and not to TANF block grant requirements.

In the 1999-01 biennium, \$49.8 million (\$31.8 million in 1999-00 and \$18.0 million in 2000-01) of Wisconsin's TANF block grant allocation is transferred from the Department of Workforce Development (DWD) to a DHFS program revenue (PR) appropriation to be used as social service block grant funds and distributed to counties through community aids. These funds are subject to the same requirements identified above for the social service block grant.

**Substance Abuse Prevention and Treatment Block Grant.** In 2000-01, an estimated \$11.3 million will be distributed from the substance abuse prevention and treatment (SAPT) block grant to counties through community aids allocations. This block grant is intended to support projects for the development and implementation of prevention, treatment and rehabilitation activities directed to substance abuse. Federal guidelines for the SAPT block grant require that, at a minimum, 20% of block grant funding be spent on education and prevention activities and 10% of the grant be used to expand substance abuse treatment services for pregnant women and women with dependent children. In addition, federal guidelines require treatment programs for intravenous drug abuse that are supported by the SAPT block grant to admit individuals into treatment within 14 days after making such a request or 120 days of such a request, if interim services are made available within 48 hours. Further, states must provide, directly or through contract, tuberculosis services such as counseling, testing, treatment, and early intervention services for substance abusers at risk for the human immunodeficiency virus (HIV) disease. Counties decide what specific services will be provided with SAPT block grant funds, but must comply with federal guidelines.

**Child Welfare Funds.** Child welfare funds are provided under Title IV-B of the Social Security Act for permanency planning for children. Unlike Title IV-E (foster care) funding, child welfare funds may not be used to fund out-of-home care, nor may these funds be used to provide child care that is exclusively work-related. The primary purpose

of federal child welfare funding is to keep children with their own families. These services include respite care, intensive family treatment and individual and family counseling. A portion of this funding is also allocated to Native American tribes. Funds are distributed to states on the basis of their under-21 population and per capita income. In 2000-01, it is estimated that \$3.7 million will be available for community aids under Title IV-B child welfare funding.

**Community Mental Health Block Grant.** For 2000-01, an estimated \$2.5 million will be distributed from the federal community mental health block grant to counties to provide comprehensive community mental health services to adults with serious mental illness and to children with a serious emotional disturbance, evaluate programs and services and conduct planning, administration and educational activities related to providing services. Services provided with funds from the block grant include: (a) respite care; (b) adult family home care; (c) community prevention services; (d) crisis intervention; and (e) counseling and therapy. Federal guidelines allow up to 5% of the block grant to pay for administrative costs. Funds, among other restrictions, may not be used to provide inpatient services, or to make cash payments to intended recipients of health services.

### **General Purpose Revenue**

The largest source of funding for community aids is state, general purpose revenues. For the 2000-01 fiscal year, \$196.0 million GPR is appropriated for community aids. As Table 1 indicates, GPR funds comprise approximately 62.3% of all community aids funds in the 1999-01 biennium.

### **County Matching Funds**

The statutes require counties to provide matching funds for the basic county allocation and the Alzheimer's family and caregiver support allocation. Counties are not required to provide matching funds for the family support program and the SAPT and community mental health block grant allocations.

Under current practice, the match requirement for the Alzheimer's family and caregiver support allocation has not been applied uniformly to all counties. Counties have the option of receiving their Alzheimer's allocation through their department of social services, human services, area aging agency or department of health. DHFS has required only those counties that receive their allocation through their department of human services or social services to provide the match. Those counties that receive their allocation through their area aging agency or their department of health are not required to provide the match. For 2000, 22 counties received their Alzheimer's family and caregiver support allocation through their area aging agency, and one county received its allocation through its department of health.

The required county match to state and federal community aids funding is established by statute at 9.89%. County matching funds may be provided from county tax levies, state revenue sharing funds or private donations. Private donations cannot exceed 25% of the required county match. A county's community aids allocation is reduced by one dollar for each county match dollar not expended.

In 1999, a total of \$250,100 in community aids funding was not allocated to six counties due to underspending of county matching funds. This unallocated community aids funding represented

less than one percent of the required total county match for all 72 counties (\$30.6 million in 1999).

Most counties provide county funds in excess of the required match. As shown in Figure 2, during the twelve-year period beginning in 1987, county expenditures over the required match have increased from \$49.2 million in 1987 to \$212.6 million in 1999, with a peak in 1997 at \$221.8 million. Appendix II provides specific county by county information on reported "overmatch" spending for calendar years 1998 and 1999. These "overmatch" funds are supported primarily through county property tax revenue.

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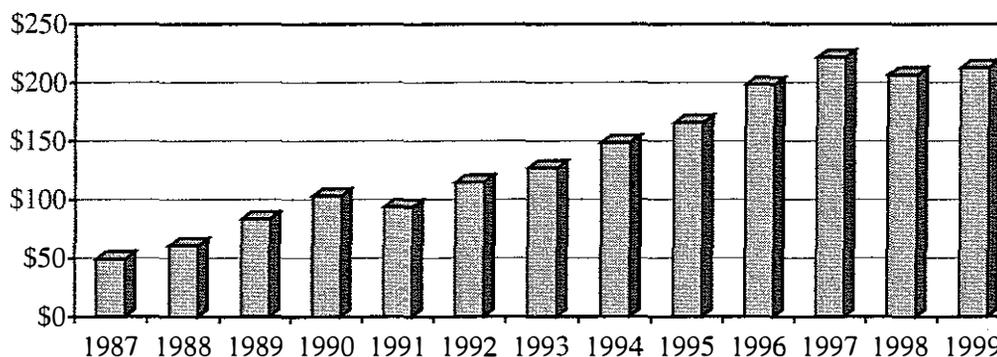
### Eligibility Criteria and Fees

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All persons who are eligible for SSI or medical assistance are eligible for services funded through county social services agencies. In addition, persons who have income at or below levels determined by DHFS are eligible for these services. For calendar year 2000, this level is 75% of the state's median income, or \$3,007 per month for a family of three. Counties may choose to provide services to persons with higher incomes.

Counties are required to charge fees, based on

**Figure 2: Community Aids County Overmatch Expenditures (In Millions)**



the ability to pay for certain services. Counties are prohibited from charging fees for certain other services and are permitted, but not required, to assess a fee for other services. Appendix III provides greater detail regarding services for which fees are mandatory, exempt or optional.

By rule, DHFS establishes a uniform fee schedule that is used for all fees, except under certain circumstances. The amount paid varies depending on the number of persons in the family and the amount of monthly income the family receives. For example, in 2001, a family of three with gross monthly income of \$2,000 would be required to pay a monthly fee of \$5 for services received. A family of three with gross monthly income of \$3,000 would be required to pay a monthly fee of \$185 for services received.

Parents who are ordered by a court to pay child support for a child in substitute care, as determined by the child support percentage standard, are exempt from the requirement that they also pay uniform fees for the substitute care services that are provided by the county.

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## Allocation Methods

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Community aids are allocated in the form of a basic county allocation (BCA) and several categorical allocations that are earmarked for certain purposes. This section explains each categorical allocation and describes the basis on which the funds within each allocation are distributed to counties. Table 2 indicates the funding levels for the BCA and the categorical allocations for calendar years 2000 and 2001.

### Basic County Allocation

Basic county allocations are funds distributed to counties that are not earmarked for specific services, although counties must expend these funds for eligible community aids services. Appendix IV provides county-by-county community aids allocations to counties for 1999. Eligible community aid services are identified in Appendix V.

**Maintenance-of-Effort and Other Requirements.** Although counties have considerable flexibility in determining how the basic county allocation is used, counties are required to provide fund-

**Table 2: Community Aids – Calendar Years 2000 and 2001**

	2000	2001
Basic County Allocation	\$286,239,400	\$281,852,000**
Categorical Allocations		
Substance abuse prevention and treatment block grant	\$11,318,700	\$11,318,700
Family support program	4,339,800	4,339,800
Community mental health block grant	2,513,100	2,513,100
Alzheimer's family and caregiver support program	1,993,400	2,270,100
Tribal child care	412,800	412,800
Categorical Allocations	<u>\$20,577,800</u>	<u>\$20,854,500</u>
GRAND TOTAL	\$306,817,200	\$302,706,500

\*Because the 2000-01 state fiscal year ends June 30, 2001, and state contracts with counties are based on a calendar year, the amounts appropriated for January-June, 2001, have been doubled to estimate amounts for 2001.

\*\*Does not include \$4,667,000 transferred to Family Care.

ing from this allocation to meet certain maintenance-of-effort requirements.

First, as a result of federal requirements relating to the SAPT block grant, counties are required to provide funding from the BCA for substance abuse services, in at least the amount budgeted for these services in 1982 (\$21.4 million statewide). In calendar year 2000, counties indicated to DHFS that they would expend approximately \$32.7 million statewide from the BCA for substance abuse services.

Additionally, counties that receive funding to supplement payments for the care of individuals to allow them to continue to live in a family home or other noninstitutional setting after becoming age 18 are prohibited from using these funds to replace funds previously used by the county for this purpose.

Counties use their basic county allocations to support services they are required to provide under state and federal law. For example, counties are required to investigate suspected child and elder abuse cases within 24 hours of receiving a report.

**Family Care.** The Family Care program is a pilot program that is intended to consolidate and replace current long-term care programs. As of January 1, 2001, five counties operated Family Care pilot programs: Fond du Lac, Portage, La Crosse, Milwaukee and Richland Counties.

Community aids are used to support long-term care programs in counties. Therefore, with the introduction of Family Care, some clients who are currently being served through community aids funded programs will now be served through Family Care, and counties will not need to provide these long-term care programs under community aids. Thus, the BCA is annually adjusted for the Family Care pilot counties beginning in calendar year 2001 and the funds from the BCA are transferred to support Family Care.

The categorical allocation for the Alzheimer's

family and caregiver support program (AFCSP) is also adjusted for Family Care counties. Current AFCSP participants in the Family Care pilot counties have the choice of remaining in AFCSP or enrolling in Family Care and receiving AFCSP services through Family Care, if they meet the Family Care financial eligibility criteria. Counties maintain funding to serve their current clients in AFCSP. When an individual leaves the AFCSP, for whatever reason, DHFS transfers the appropriate funds to the Family Care budget.

Additional information on the Family Care program is provided in Informational Paper #49, prepared by the Legislative Fiscal Bureau, entitled "Community-Based Long-Term Care Programs."

### **Categorical Funding**

For calendar year 2001, estimated funding for five categorical allocations is \$20.9 million, while the BCA is estimated to total \$281.9 million. The categorical allocations for the SAPT block grant and the community mental health block grant reflect federal requirements that these funds be distributed for specific purposes. These requirements were described previously in this paper. The following section describes the categorical allocations for the family support program, the Alzheimer's family and caregiver support program and tribal child care.

**Family Support Program.** Funding for the family support program was first provided in 1983. Under this program, grants are allocated to enable children with severe disabilities to remain at home with their parents. For purposes of program eligibility, a disabled child is a child who is physically, mentally or emotionally impaired and is substantially limited in being able to perform at least three of seven functions of daily living, including self-care, receptive and expressive language, learning and mobility.

The program provides up to \$3,000 in services and goods annually to eligible families. Services include training for parents in behavioral management, respite care, home modification and at-

tendant care. Up to 10% of the funds allocated to a county may be used to pay for staff and other administrative costs. In the 1999-01 biennium, \$4,339,800 is budgeted for the program annually. More information on this program is provided in Informational Paper #50, prepared by the Legislative Fiscal Bureau, entitled "Services for Persons with Developmental Disabilities."

**Alzheimer's Family and Caregiver Support Program.** The Alzheimer's family and caregiver support program funds services and goods to persons with Alzheimer's disease and their families (or caregivers) to enable the family to maintain the person with Alzheimer's disease as a member of the household. Typical services provided through this program include respite care and adult day care. Individuals who receive services through this program may live in their own homes or in some other residential setting, such as an adult family home (a residential placement for an adult which is similar to foster care for a child) or a community-based residential facility (CBRF). The program does not provide services to individuals who live in an institutional setting, such as a nursing home. In 1999-00, \$1,993,400 and in 2000-01, \$2,226,300 is budgeted for the program.

**Tribal Child Care.** Under the community aids allocations, \$412,800 is provided annually for use by federally recognized American Indian tribes or bands to provide child care for children that meet the definition of an eligible child for the federal child care and development block grant. Under federal law, an eligible child is a child: (a) who is less than 13 years of age; (b) whose family income does not exceed 85% of the state median income for a family of the same size (\$49,207 for a four-person family based on 1998 income); and (c) who resides with a parent or parents who are working or attending a job training or educational program or is receiving, or needs to receive, protective services. Funding is distributed to the tribes through the consolidated family services program, a distribution mechanism for tribal human services allocations. Table 3 identifies the annual allocations of child care funds to the tribes in the

1999-01 biennium.

**Carry-Forward Provisions.** The Department is required, at the request of a county, tribe or nonprofit organization, to carry forward up to 3% of the total amount of community aids funds allocated to that entity for a calendar year for use in the following calendar year. However, certain restrictions apply to this carry-forward authority:

- All funds carried forward for a tribe or nonprofit organization and all federal child welfare funds and SAPT and community mental health block grant funds carried forward for a county must be used for the purpose for which the funds were originally allocated;
- Funds carried forward for a county may not be used for staff or administrative costs;
- Any funds allocated to a nonprofit organization may not be carried forward unless the organization continues to be eligible in the subsequent year to receive that funding; and
- The county match requirement applies to any funds carried forward that were originally required to be matched.

DHFS may carry forward an additional 10% for

*Table 3*

**Tribal Child Care Annual Allocations (1999-01 Biennium)**

Tribe	Annual Amount
Bad River Band	\$57,850
Ho Chunk Nation	30,477
Lac Courte Oreilles Band	46,750
Lac du Flambeau Band	36,450
Menominee Tribe	36,455
Oneida Tribe	64,585
Red Cliff Band	36,954
Sokaogon	35,280
St. Croix	34,819
Stockbridge-Munsee	<u>33,180</u>
<b>Total</b>	<b>\$412,800</b>

unforeseen emergencies, for justifiable unit services costs above planned levels and to provide compensation for increased costs due to population shifts.

A total of approximately \$514,300 was carried forward for counties from 1999 to 2000. Those funds not carried forward lapse to the general fund at the end of each fiscal year. In 1999, no funds lapsed to the general fund.

### **Summary Data on Community Aids Allocations**

Appendix VI provides county-by-county allocations for 1995 through 2001 and Appendix VII ranks counties based on community aids funding per capita for 2001.

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### **Additional Foster Care**

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As indicated previously, Title IV-E foster care funds are received as reimbursement for expenditures made on behalf of Title IV-E eligible children. However, the community aids allocations are determined based on estimates of the amount of foster care funds that will be received in a given year. If the state does not receive the estimated amount of foster care funds, then counties' community aids allocations are adjusted downward.

Prior to enactment of 1997 Wisconsin Act 27, if DHFS received any excess foster care funds, meaning funds in addition to the amounts estimated and included in the community aids allocations, and DHFS proposed to allocate the excess funds so that the statutory allocations for community aids were exceeded, DHFS had to submit a plan to the Department of Administration (DOA) for approval. If DOA approved the plan, then the plan was submitted to the Joint Committee on Finance under a 14-day passive-approval process. Any funds not approved for allocation to the counties were deposited to the state's general fund.

In an effort to encourage counties to increase their claims under Title IV-E and therefore, revenue to the state, Act 27 provided a mechanism that would automatically distribute a portion of any additional Title IV-E funds to counties. Historically, no excess foster care funds were distributed to the counties. Rather, any excess foster care funds were deposited to the general fund. Act 27 provided that if on December 31 of any year, there remains unspent or unencumbered Title IV-E funds that exceed the amounts estimated and allocated under community aids, then DHFS is required to carry forward these excess Title IV-E funds and distribute at least 50% to counties other than Milwaukee County for services and projects to assist children and families. [Milwaukee County is not eligible for these funds since DHFS is responsible for providing child welfare services in Milwaukee County and therefore incurs the foster care costs under Title IV-E.] Of the excess Title IV-E funds distributed to counties, at least 50% must be used to provide services for children who are at risk of abuse or neglect in order to prevent the need for child abuse and neglect intervention services. Further, counties cannot use these funds to supplant any other funds expended by the county for services and projects to assist children and families.

The remainder of any excess Title IV-E funds are deposited in a DHFS appropriation to be used to support the operational costs of augmenting income to the state under Title IV-E, medical assistance and Medicare. As provided in 1997 Wisconsin Act 86, if DHFS proposes to use any of these additional funds for any purpose other than augmenting income, then DHFS must submit the plan to DOA for approval. If DOA approves the plan, then the plan is submitted to the Joint Committee on Finance under a 14-day passive-approval process.

Through this process, some Title IV-E funds have been transferred to the general fund. In April, 1999, the Joint Committee approved a lapse of \$382,300 of income augmentation funds in 1998-1999. 1999 Wisconsin Act 9 required that

\$12,013,200 from DHFS income augmentation receipts be lapsed into the general fund in 1999-00 and \$6,100,000 be lapsed in 2000-01. Table 4 identifies the amount of excess foster care funds that have been deposited to the general fund since 1994-95.

In 2000, \$5.2 million and in 2001, \$6.8 million in additional Title IV-E foster care funds were distributed to counties. This funding is provided in addition to the community aids allocations identified earlier in this paper. Appendix VIII identifies the allocation of these funds to counties.

*Table 4*  
**Distribution of Title IV-E Funds State Fiscal Year 1994-95 to 2000-01**

Year	Community Aids Basic County Allocation	Amount Transferred to General Fund
1994-95	\$27,414,300	\$7,814,700
1995-96	38,900,740	138,322
1996-97	40,151,000	0
1997-98	40,222,600	0
1998-99	40,379,700	382,300
1999-00	40,379,700	12,013,200
2000-01*	40,600,000	6,100,000

\*Estimate

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### Delivery of Human Services

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Under state law, each county board of supervisors is responsible for establishing the county organizational structure for the delivery of human services. These county departments have the function, duty and power, in accordance with the rules promulgated by DHFS and subject to DHFS supervision, to administer social services as provided under Chapters 46 and 48 of the statutes and mental health and substance abuse services and services for the developmentally disabled as provided under Chapter 51.

### Social Services

County social services agencies perform functions that are frequently referred to as "public welfare" and "child welfare" activities. The type of assistance varies considerably, but includes: (1) assistance to persons to enable them to cope adequately at home by providing in-home supportive services, home-delivered meals, transportation and similar services; (2) investigation and services in child abuse and neglect cases; (3) community programs for juvenile offenders; and (4) supervision of alternative care for children, such as short-term shelter care, foster care, or placement in a group home or child caring institution. Legal services, housing assistance, work-related training services, family planning, information and referral services and counseling are also provided.

Counties have considerable flexibility in determining how much funding to allocate for each type of service. The statutory requirements of counties in this area are conditional. Wisconsin statutes require counties to provide social services to persons who receive federal and state payments for supplemental security income (SSI) and AFDC, but the types of services are not specified. In addition, the requirements only extend to the limits of available state and federal funds and of county funds required to match state funds.

Economic support programs such as Wisconsin Works, food stamps and child care are not funded from community aids. Further, counties do not deliver or coordinate all local social services. Some state-funded social services, such as family planning, shelters for homeless persons and assistance to victims of domestic abuse, are provided by private, nonprofit agencies that contract directly with DHFS. In addition, many programs are provided by private agencies that are funded through private contributions and community fund-raising organizations or which are paid for directly by persons with adequate financial resources.

## Mental Health, Developmental Disabilities and Substance Abuse Services

Counties also provide services to persons with a range of mental, developmental and behavioral disabilities. These services frequently include: diagnosis and evaluation, emergency treatment, inpatient and outpatient care, training, assistance with residential arrangements, such as group homes, adult family homes or supervised apartments, transportation, and work-related services, such as sheltered employment, job placement assistance or vocational training. In each case, the disability must be long-term in duration and constitute a substantial handicap to the individual. Under s. 51.42 of the statutes, counties are required to provide certain services, including diagnosis and evaluation, emergency services, inpatient and outpatient care, supportive transitional services, and residential facilities. In addition, other services are mandated for clients with developmental disabilities. However, these requirements apply only within the limits of available state and federal funds and any county funds appropriated as matching funds.

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### Community Aids Formula

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As discussed previously, the community aids formula has never been used as a mechanism for redistribution of base funding for community aids. Rather, the formula has been used as a distribution mechanism for increased funding of community aids and as a tool for identifying those counties which are underfunded relative to an equitable distribution of community aids funds. The formula was designed to determine an equitable distribution of aids funding. The formula is based on three factors, each weighted equally:

a. *Each county's share of the state's medical assistance population.* This factor is intended as a measure of the potential demand for human

services within each county.

b. *The urban-rural nature of each county.* This factor provides proportionately larger allocations to counties with the most urban and most rural populations and is intended as a measure of both the degree of social and economic problems within each county and the relative cost of providing services.

Urban counties are defined as those counties in which 70% or more of their population are living in communities of 2,500 or more. These counties would receive 40% of the allocation available based on this factor. Rural counties are defined as those counties in which less than 9% of their population are living in communities of 2,500 or more persons. These counties would receive 40% of the allocation available for this factor. The remaining 20% would be allocated to those counties with between 9% and 70% of their populations living in communities of 2,500 or more.

c. *The per-capita market value of the taxable property in each county.* This factor is intended as a measure of each county's ability to provide human services beyond the level of state and federal funding and the required county match.

The community aids formula was originally used as a mechanism for distributing increased community aids funding to counties. Chapter 34, Laws of 1979, provided, for the period beginning January 1, 1980, an increase of 15% of 1979 contract levels to be distributed to counties for expanded services based on the community aids formula. Under the same provision, up to 8% of the 1979 contract level was available to counties if matched by an equal portion of county tax levy or state revenue sharing funds.

Overall, because the community aids formula is based upon three factors which change from year to year, a county's need for community aids funding as measured by the formula may also shift from year to year relative to other counties. For this reason, "equity" in the distribution of the basic county allocation is not entirely possible unless

funds are reallocated among counties from year to year or unless sufficient new funds are appropriated to enable all counties to receive 100% of their formula amount.

The community aids formula is not used every year to determine county allocations. It has only been used a few times to allocate BCA funds, the last being in 1991. Otherwise, counties receive the same percentage increase or decrease, as determined by the level of available funds.

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### State Program Monitoring and Evaluation

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The Department uses several tools to monitor and assess county human services programs. These include a requirement that counties submit budgets to DHFS and an annual contract the Department signs with each county and uses to subsequently audit the county and fiscal and program information collected from each county. These monitoring and evaluation tools are discussed below. In addition, regional staff are assigned by the Department to specific counties to monitor programs and serve as liaison staff.

### County Budgets

Counties are required to submit annual budgets for human services that are developed as part of the county budgeting process. Annually, the Department informs each county, by mid-summer, of the estimated amount of community aids funds the county will receive in the succeeding calendar year. A county is then required to assess, with public participation, the needs of its clients and the resources available to meet these needs. Once the budget is developed, it must be submitted to the county executive, county administrator or county board for review and then be transmitted to DHFS by December 1 of each year.

### State-County Contract

DHFS is required to submit a model of the state-county contract covering the administration of community aids programs to each county by May 1 of each year. In addition, the Department transmits the contracts containing estimated allocation amounts to each county in late fall. The county board must approve the contract by January 1 of the year in which it takes effect, unless an extension is granted. The contract is between the Department and the county board and legally obligates the parties to expend only the amount of available state and federal funds and county funds used to match state funds.

The contract includes the following provisions:

- a. A requirement that the county comply with state statutes and administrative rules, federal law and regulations, departmental memoranda addressing social services standards and accounting standards, the human services reporting system handbook and the accounting principles, policies and allowable costs manual;
- b. A provision that the contract is contingent upon authorizations in federal and state law;
- c. A requirement that fiscal and client reports and records the county keeps be submitted to the Department, within the applicable federal and state laws and departmental regulations concerning confidentiality of client records; and a requirement that the Department provide counties 45 days' notice of any changes in record-keeping requirements if such requirements are not the result of changes in federal or state laws, rules or regulations or court orders;
- d. Authority for the Department to conduct periodic financial and compliance audits and for the county to contract for an audit with an independent, nongovernmental auditor;
- e. The process for handling contract interpretation disagreements;

f. The process by which the Department reimburses counties; and

g. An assurance that the county has an affirmative action plan and that the county will implement the requirements of the federal Americans with Disabilities Act.

### **Human Services Reporting System**

Counties are required to report certain types of information to DHFS through the human services reporting system (HSRS). Information contained in HSRS includes clients served, services received and expenditures for services provided through the community aids, community options, youth aids, intoxicated driver and community integration programs. This system includes two types of reports: client-specific reports on persons served and summary reports on expenditures for services. Information collected in HSRS is used to comply with federal and state reporting requirements.

Counties are required to report on the following 10 data elements for every client served with community aids funding: (1) agency identification; (2) client identification; (3) birthdate; (4) sex; (5) ethnic group; (6) standard program category cluster (described below); (7) days of care for community residential services, inpatient and institutional care and care in an institution for mental diseases; (8) target group; (9) client characteristics; and (10) community aids child care client characteristics. Reports containing client-specific information are required on an annual basis.

Counties are required to submit annual and mid-year summary information to the Department. This summary data includes information on the total expenditures funded by: (a) state aid, local property tax, shared revenues and donor match;

and (b) all county agency revenues, by target population and service type.

Based on preliminary data, in 1999, counties reported serving 404,212 clients through community aids, the community options program, youth aids and related programs. This represented a 2.8% increase over the number of clients counties reported serving in 1998. County expenditures from all sources (including community aids, community options, youth aids, and those reimbursed by other funding sources such as medical assistance and private insurance) for human services totaled over \$1,374.2 million in 1999, which represented a 6.2% increase over 1998. Appendix IX provides additional information regarding the number of clients served and expenditures by target group and service type for calendar year 1999. Appendix X provides definitions, developed by DHFS, for the eight target groups.

### **Fiscal Reporting System**

Counties are also required to submit monthly reports that indicate expenditures based on the categories included in the state contract. This fiscal reporting system, the community aids reporting system (CARS), is used to authorize the payment of funds to counties. The categories included in the contract are those for which funding is distributed and are not the categories used by counties for HSRS. In addition, these reports do not indicate expenditures by fund source because community aids funds are not distributed to counties in that manner. Because CARS data elements are based on budget contract control categories whereas the human services reporting system data elements encompass clients served in broad program categories, it is generally not possible to make data comparisons between the two reporting systems.

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## APPENDICES

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This paper includes the following 10 appendices.

- Appendix I indicates community aids expenditures from 1979-80 through 2000-01.
- Appendix II indicates county expenditures over the required match for calendar year 1998 and 1999.
- Appendix III identifies which service fees are mandatory, exempt or optional.
- Appendix IV indicates the calendar year 2001 community aids allocations to counties.
- Appendix V lists eligible community aids services.
- Appendix VI provides a comparison of community aid allocations by county for calendar years 1995 through 2001.
- Appendix VII provides community aids allocations by county for 2001 on a per capita basis.
- Appendix VIII indicates the annual allocation of additional federal foster care funds for 2000 and 2001.
- Appendix IX indicates the number of clients served and county expenditures on human services funded with community aids, the community options program, youth aids and related programs in calendar year 1999.
- Appendix X describes the target groups used to define the populations that receive human services.

## APPENDIX I

### Community Aids Expenditures by State Fiscal Year

Fiscal Year	GPR	FED	Total
1979-80	\$136,304,100	\$63,010,300	\$199,314,400
1980-81	147,853,500	70,444,700	218,298,200
1981-82	162,673,000	57,538,900	220,211,900
1982-83	164,789,500	58,521,400	223,310,900
1983-84	164,911,600	58,354,800	223,266,400
1984-85	177,969,800	62,527,600	240,497,400
1985-86	191,079,700	66,878,400	257,958,100
1986-87	205,500,500	61,891,300	267,391,800
1987-88	186,899,800	65,895,300	252,795,100
1988-89	178,926,100	65,604,000	244,530,100
1989-90	183,240,900	69,068,500	252,309,400
1990-91	199,961,300	65,020,600	264,981,900
1991-92	199,842,600	102,689,300	302,531,900
1992-93	209,070,200	98,864,300	307,934,500
1993-94	191,742,800	113,221,600	304,964,400
1994-95	216,452,700	104,540,000	320,992,700
1995-96	217,692,800	113,241,700	330,934,500
1996-97	205,379,800	97,397,700	302,777,500
1997-98	177,322,500	130,856,400	308,178,900
1998-99	175,393,200	123,651,100	299,044,300
1999-00	175,393,200	118,848,200	294,241,400
2000-01	195,965,700 *	105,800,000 **	301,765,700

\* Amount appropriated

\*\* Estimate

Notes:

1) In addition to the expenditures identified above, program revenue from the drug abuse program improvement surcharge (DAPIS) was expended for community aids -- \$800,000 in 1993-94 and \$250,000 in 1997-98.

2) GPR amounts shown for fiscal years 1987-88 through 1998-99 reflect the transfer of youth aids maintenance-of-effort funding from community aids to the youth aids program, beginning in calendar year 1988. The annual amount transferred was \$25,790,500.

3) Beginning in fiscal year 1996-97, the amounts shown reflect the transfer of GPR and federal funding for child care, to the Department of Workforce Development under provisions of 1995 Wisconsin Act 289.

APPENDIX II

Community Aids County Overmatch Expenditures  
Calendar Years 1998 and 1999

County	1998	1999	County	1998	1999
Adams	\$654,507	\$869,633	Marathon	\$7,363,540	\$7,003,719
Ashland	193,662	273,676	Marinette	1,428,006	1,234,368
Barron	1,670,392	1,672,213	Marquette	791,995	802,400
Bayfield	546,235	666,374	Menominee	44,779	0
Brown	11,730,797	14,437,342	Milwaukee	16,564,659	8,364,573
Buffalo	20,140	161,121	Monroe	1,769,905	1,578,161
Burnett	380,994	350,919	Oconto	1,361,609	1,225,139
Calumet	1,620,708	1,322,018	Oneida	1,354,380	981,546
Chippewa	878,266	1,006,443	Outagamie	10,324,326	10,698,484
Clark	1,290,904	1,543,358	Ozaukee	3,280,457	2,015,903
Columbia	1,074,835	1,892,819	Pepin	33,794	0
Crawford	165,246	242,504	Pierce	501,937	670,025
Dane	37,244,518	44,581,375	Polk	1,584,796	1,999,732
Dodge	5,004,053	4,602,584	Portage	1,548,766	1,642,214
Door	1,567,431	1,882,282	Price	587,927	720,367
Douglas	1,106,205	1,051,974	Racine	2,882,594	3,623,269
Dunn	1,169,693	2,192,249	Richland	291,524	166,098
Eau Claire	3,135,278	4,446,450	Rock	7,133,042	7,784,983
Florence	0	0	Rusk	248,476	277,588
Fond du Lac	3,337,294	4,680,568	Sauk	2,698,080	3,119,740
Forest	102,665	172,841	Sawyer	164,440	207,845
Grant	655,130	580,859	Shawano	290,611	385,892
Green	1,044,889	1,323,760	Sheboygan	7,562,984	8,380,269
Green Lake	1,284,812	1,424,534	St. Croix	1,981,857	2,478,288
Iowa	521,981	626,870	Taylor	231,294	239,401
Iron	44,095	97,622	Trempealeau	52,415	22,992
Jackson	791,974	648,014	Vernon	354,810	309,329
Jefferson	4,710,712	3,272,561	Vilas	361,908	434,859
Juneau	672,930	628,144	Walworth	4,234,564	4,556,905
Kenosha	3,322,374	2,721,168	Washburn	245,658	491,830
Kewaunee	0	149,838	Washington	4,855,183	3,832,526
LaCrosse	4,789,971	4,890,968	Waukesha	10,819,101	12,107,175
Lafayette	743,488	659,950	Waupaca	1,703,503	1,647,063
Langlade	1,709,699	1,372,559	Waushara	1,555,961	1,657,665
Lincoln	919,288	879,407	Winnebago	9,183,440	6,868,181
Manitowoc	2,962,315	3,329,677	Wood	4,326,622	4,371,017
			Total	\$206,786,424	\$212,554,220

## APPENDIX III

### Services for Which Fees are Mandatory, Exempt or Optional

Services for Which a Fee is Mandatory	
<ul style="list-style-type: none"> <li>• Child care (if income is above Department-established limit)</li> <li>• Respite care provided or purchased by Chapter 51 boards</li> <li>• Family support</li> <li>• Adoptions under s. 48.837(7) of the statutes</li> <li>• Adult family home care</li> <li>• Foster and group home care</li> <li>• Shelter care except in domestic abuse emergencies</li> <li>• Court intake and studies: divorce settlements and custody and visitation studies not funded by the social services block grant</li> <li>• Juvenile correctional institution services</li> <li>• Congregate and home-delivered meals funded under the community options program</li> </ul>	<ul style="list-style-type: none"> <li>• Detoxification</li> <li>• Inpatient &amp; Institutions for Mental Disease</li> <li>• State Centers for the Developmentally Disabled/nursing</li> <li>• Child caring institutional care</li> <li>• Community-based treatment facility care</li> <li>• Medical day center services</li> <li>• Counseling and therapy not funded by the social services block grant</li> <li>• Community support: assessment &amp; diagnosis, education &amp; training, counseling &amp; psychotherapy, medical support, transportation</li> <li>• Intake assessments for intoxicated use of motor vehicle, boat, all terrain vehicle, snow mobile.</li> <li>• Intake assessment for use of controlled substances</li> </ul>
Services Which are Exempt from Fees	
<ul style="list-style-type: none"> <li>• Sheltered employment</li> <li>• Interpreter services and adaptive equipment needed for access to services</li> <li>• Adoption services other than by private agencies to non-relatives</li> <li>• Court intake and studies under Chapters 48, 51 and 55 ordered by the court &amp; required by Statutes</li> <li>• Adult restitution</li> <li>• Family planning</li> <li>• Congregate and home-delivered meals (funded by the Older Americans Act)</li> <li>• Community prevention, organization and awareness</li> </ul>	<ul style="list-style-type: none"> <li>• Crisis intervention: information and referral</li> <li>• Nonmedical day center services</li> <li>• Community support: eligibility determination, advocacy, person locating</li> <li>• Outreach, information and referral</li> <li>• Intake assessment: community options program, child abuse and neglect</li> <li>• Advocacy and defense resources</li> <li>• Health screening and accessibility</li> <li>• Staff Training and development</li> <li>• Agency/systems management</li> </ul>
Services for Which Counties May Charge a Fee	
<ul style="list-style-type: none"> <li>• Respite care purchased or provided by county social services departments</li> <li>• Supportive home care</li> <li>• Housing/energy assistance</li> <li>• Specialized transportation and escort services</li> <li>• Work-related services and supported employment (other than sheltered employment)</li> <li>• Daily living skills training (except for nonmedical day services)</li> <li>• Interpreter services and adaptive equipment (not needed for access to services)</li> <li>• Shelter care in domestic abuse emergencies</li> <li>• Court intake and studies under Chapters 48, 51 and 55 requested by an individual</li> <li>• Adult day care</li> </ul>	<ul style="list-style-type: none"> <li>• Court intake and studies for divorce assessments custody and visitation studies funded by the federal social services block grant</li> <li>• Juvenile probation and supervision</li> <li>• Juvenile reintegration and aftercare</li> <li>• Juvenile restitution</li> <li>• Congregate and home-delivered meals (not funded by Older Americans Act)</li> <li>• Recreation activities</li> <li>• Crisis intervention: counseling, supervision to minors, transportation</li> <li>• Counseling and therapy funded by the social services block grant</li> <li>• Case management</li> <li>• Protective payment/guardianship</li> </ul>

APPENDIX IV

Calendar Year 2001  
Community Aids Allocations to Counties

County	Basic County Allocation	Alzheimer's Family and Caregiver Support	Mental Health Block Grant	Substance Abuse Prevention and Treatment Block Grant	Family Support	Total Allocation	Required County Match
Adams	\$803,843	\$7,910	\$8,555	\$34,248	\$14,710	\$869,266	\$84,356
Ashland	1,108,720	9,677	9,580	28,276	24,652	1,180,905	120,069
Barron	2,078,567	19,227	20,066	79,713	43,784	2,241,357	216,383
Bayfield	817,303	7,516	7,354	35,262	27,695	895,130	85,109
Brown	9,451,691	82,201	98,340	365,279	172,531	10,170,042	1,008,282
Buffalo	861,394	7,624	7,803	23,204	14,540	914,565	88,107
Burnett	836,606	7,557	7,248	28,760	13,761	893,932	87,984
Calumet	1,240,470	10,720	12,388	46,328	32,763	1,342,669	131,742
Chippewa	2,783,536	25,149	27,037	96,341	48,812	2,980,875	310,672
Clark	1,917,295	15,868	16,032	55,026	35,115	2,039,336	208,008
Columbia	1,932,879	17,993	16,818	77,128	39,753	2,084,571	202,418
Crawford	1,441,240	8,246	7,939	32,086	16,443	1,505,954	145,386
Dane	17,738,628	135,797	160,098	650,692	256,945	18,942,160	2,045,457
Dodge	3,107,086	30,007	31,007	111,966	68,205	3,348,271	333,105
Door	1,141,712	8,433	7,665	46,219	39,714	1,243,743	119,020
Douglas	2,969,294	12,348	25,572	110,750	42,110	3,160,074	311,158
Dunn	1,806,385	15,755	18,754	69,453	28,066	1,938,413	184,994
Eau Claire	5,190,792	43,156	51,569	189,338	77,135	5,551,990	547,889
Florence	457,309	5,273	3,434	8,512	11,940	486,468	46,464
Fond du Lac	3,777,009	36,561	37,307	153,543	86,451	4,090,871	388,570
Forest	736,488	6,798	5,385	29,600	13,923	792,194	75,071
Grant	2,420,095	20,944	21,745	77,899	52,294	2,592,977	251,416
Green	1,265,235	12,138	11,554	45,365	24,454	1,358,746	136,252
Green Lake	822,725	7,759	6,805	32,340	18,035	887,664	88,355
Iowa	947,892	7,339	8,335	29,860	20,045	1,013,471	99,156
Iron	434,690	5,844	3,621	7,985	7,909	460,049	45,054
Jackson	1,403,215	9,306	8,922	39,385	29,715	1,490,543	143,015
Jefferson	2,848,909	26,593	26,128	109,299	60,717	3,071,646	310,204
Juneau	1,094,599	10,417	10,820	42,890	21,701	1,180,427	109,521
Kenosha	7,966,915	64,319	72,813	326,821	97,783	8,528,651	849,285
Kewaunee	883,814	7,795	7,486	26,797	23,989	949,881	90,574
La Crosse	4,577,710	47,770	56,779	204,793	86,688	4,973,740	493,776
Lafayette	878,105	7,918	7,785	22,055	32,529	948,392	90,105
Langlade	890,274	10,354	7,585	31,351	14,088	953,651	93,667
Lincoln	1,613,400	12,702	12,236	50,577	55,219	1,744,134	172,029
Manitowoc	3,959,280	35,641	35,127	140,547	67,854	4,238,449	410,116
Marathon	5,125,158	44,653	52,071	215,234	96,719	5,533,836	550,487
Marinette	1,831,638	18,498	18,732	75,173	43,155	1,987,196	196,626
Marquette	661,167	7,158	6,423	23,939	15,738	714,425	70,852
Menominee	1,123,404	6,024	5,752	41,427	19,993	1,196,600	116,161

**APPENDIX IV (continued)**

**Calendar Year 2001  
Community Aids Allocations to Counties**

County	Basic County Allocation	Community Mental Health Block Grant	Substance Abuse Prevention and Treatment Block Grant	Alzheimer's Family and Caregiver Support	Family Support	Total Allocation	Required County Match
Milwaukee*	\$85,941,010	\$589,822	\$685,612	\$4,014,021	\$745,328	\$91,975,793	\$9,562,168
Monroe	1,891,770	17,417	18,307	71,115	41,564	2,040,173	211,149
Oconto	1,365,126	12,783	13,353	48,966	36,473	1,476,701	139,896
Oneida	1,504,505	12,490	11,797	64,848	30,501	1,624,140	160,562
Outagamie	6,388,566	57,996	64,126	236,002	118,446	6,865,136	663,963
Ozaukee	2,624,814	23,581	25,233	85,354	51,931	2,810,913	286,999
Pepin	620,482	6,142	4,795	11,569	12,409	655,397	64,636
Pierce	1,402,968	11,841	13,239	51,163	24,472	1,503,683	147,334
Polk	1,896,875	17,276	17,164	68,628	36,278	2,036,221	201,592
Portage	1,906,417	22,155	25,490	111,625	50,185	2,115,872	205,410
Price	855,202	7,869	8,029	19,379	22,887	913,366	88,201
Racine	10,745,177	90,211	100,488	500,171	147,218	11,583,265	1,166,399
Richland	1,177,219	8,719	9,465	32,819	16,876	1,245,098	120,925
Rock	9,231,986	70,701	73,312	343,850	114,003	9,833,852	1,009,885
Rusk	1,100,505	8,433	9,661	30,407	16,262	1,165,268	112,005
St. Croix	1,713,511	16,329	17,529	70,176	50,988	1,868,533	191,488
Sauk	2,326,655	19,122	17,541	82,089	40,764	2,486,171	247,704
Sawyer	1,138,998	7,778	8,146	50,066	32,583	1,237,571	117,219
Shawano	1,645,624	16,623	16,604	73,720	34,149	1,786,720	176,144
Sheboygan	5,032,607	42,559	51,197	178,215	86,361	5,390,939	518,607
Taylor	1,241,668	8,300	9,043	31,092	17,526	1,307,629	125,960
Trempealeau	1,574,367	15,569	15,769	43,091	24,559	1,673,355	161,115
Vernon	1,469,295	12,971	12,392	44,268	22,006	1,560,932	150,430
Vilas	881,220	7,293	7,433	40,858	19,217	956,021	87,545
Walworth	3,415,305	24,816	22,005	118,911	58,527	3,639,564	369,354
Washburn	903,000	7,737	8,386	27,842	15,012	961,977	93,002
Washington	3,498,434	29,807	37,470	131,927	84,223	3,781,861	390,420
Waukesha	11,415,814	99,877	109,469	421,473	223,153	12,269,786	1,284,648
Waupaca	1,982,967	21,103	20,786	80,798	46,038	2,151,692	208,298
Waushara	1,075,371	10,014	10,433	37,207	36,382	1,169,407	117,285
Winnebago	7,262,178	62,911	68,961	253,027	110,203	7,757,280	768,871
Wood	<u>3,675,916</u>	<u>32,818</u>	<u>39,193</u>	<u>128,562</u>	<u>75,577</u>	<u>3,952,066</u>	<u>416,166</u>
Total	\$281,852,022	\$2,270,051	\$2,513,098	\$11,318,700	\$4,339,774	\$302,293,645	\$30,622,279

Note: In addition to these allocations, \$412,800 annually in the 1999-01 biennium is distributed to American Indian tribes and bands for child care for low-income families. These allocations do not reflect \$6,800,000 in additional foster care funds allocated to counties for programs to assist children and families

\*Allocation before \$38,792,200 reduction for Milwaukee County's child welfare services.

## APPENDIX V

### Eligible Community Aids Services

#### Child care

#### Supportive home care services

#### Specialized transportation and escort services

#### Community living/support services

- Adult day care
- Respite care
- Housing/energy assistance
- Daily living skills training
- Interpreter services and adaptive equipment
- Family support
- Congregate meals
- Home-delivered meals
- Family planning
- Protective payment/guardianship
- Case management

#### Investigations and assessments

- Court intake and studies
- Intake assessment

#### Community support

#### Work-related and day services

- Work-related services
- Nonmedical day care services

#### Supported employment services

#### Community residential services

- Adoptions
- Adult family home care
- Foster home care
- Group home care
- Shelter care
- Detoxification - Social setting
- Community-based residential facility care

#### Community treatment services

- Juvenile probation and supervision
- Juvenile reintegration and aftercare
- Restitution
- Crisis intervention
- Counseling/therapeutic resources
- Medical day treatment

#### Inpatient and institutional care

- Juvenile correctional institution services
- Detoxification - Hospital setting
- Inpatient
- Child caring institution services
- DD center/nursing home

#### Institution for mental disease (IMD) services

#### Community prevention, access and outreach

- Recreation/alternative activities
- Community prevention, organization and awareness
- Outreach
- Information and referral
- Advocacy and defense resources
- Health screening and accessibility

## APPENDIX VI

### Comparison of Calendar Year 1995 through 2001 Community Aids Allocations

County	1995	1996	1997*	1998**	1999**	2000**	2001**
Adams	\$926,671	\$935,127	\$850,888	\$854,198	\$832,378	\$867,491	\$869,266
Ashland	1,241,888	1,275,171	1,163,761	1,167,795	1,133,916	1,178,955	1,180,905
Barron	2,358,959	2,371,408	2,176,223	2,185,740	2,128,760	2,236,290	2,241,357
Bayfield	951,365	959,740	882,866	885,313	861,901	893,806	895,130
Brown	10,950,542	10,991,455	10,027,620	10,039,216	9,775,682	10,152,761	10,170,042
Buffalo	968,467	975,203	903,692	906,469	879,824	913,169	914,565
Burnett	941,350	951,158	877,450	880,648	856,418	892,361	893,932
Calumet	1,459,837	1,465,051	1,331,663	1,333,173	1,293,698	1,340,643	1,342,669
Chippewa	3,216,205	3,255,246	2,949,343	2,954,558	2,867,224	2,976,285	2,980,875
Clark	2,157,266	2,153,135	2,011,364	2,017,007	1,957,749	2,035,964	2,039,336
Columbia	2,253,967	2,279,043	2,055,392	2,024,203	2,003,155	2,081,218	2,084,571
Crawford	1,585,982	1,589,820	1,493,161	1,497,555	1,451,485	1,504,194	1,505,954
Dane	20,226,028	20,385,197	18,562,325	18,046,018	18,116,305	18,904,385	18,942,160
Dodge	3,636,280	3,671,215	3,292,438	3,300,556	3,207,181	3,341,920	3,348,271
Door	1,356,630	1,366,925	1,232,290	1,234,667	1,200,098	1,242,280	1,243,743
Douglas	3,417,243	3,434,243	3,137,763	3,146,061	3,057,319	3,168,171	3,160,074
Dunn	2,089,612	2,101,544	1,902,315	1,909,823	1,859,550	1,934,933	1,938,413
Eau Claire	5,858,549	6,064,550	5,469,166	5,483,581	5,328,513	5,542,375	5,551,900
Florence	509,248	503,589	483,472	484,857	469,933	485,959	486,468
Fond du Lac	5,434,116	5,453,792	5,054,362	5,069,890	4,925,160	5,109,467	4,090,871
Forest	847,527	839,425	779,871	783,727	764,243	791,215	792,194
Grant	2,795,091	2,808,788	2,574,981	2,579,886	2,503,181	2,591,080	2,592,977
Green	1,463,073	1,477,719	1,333,984	1,338,238	1,301,356	1,356,193	1,358,746
Green Lake	942,897	955,826	876,440	878,110	853,110	886,274	887,664
Iowa	1,088,894	1,099,111	992,709	997,946	972,167	1,012,249	1,013,471
Iron	486,902	486,756	458,113	459,055	444,381	459,530	460,049
Jackson	1,570,000	1,592,505	1,476,778	1,480,306	1,435,865	1,488,628	1,490,543
Jefferson	3,291,037	3,327,391	3,041,022	3,047,440	2,960,861	3,067,414	3,071,646
Juneau	1,296,292	1,313,690	1,160,356	1,163,716	1,131,931	1,178,250	1,180,427
Kenosha	8,762,150	8,971,624	8,286,313	8,319,518	8,104,316	8,507,906	8,528,651
Kewaunee	1,022,806	1,027,392	948,354	949,644	920,588	948,959	949,881
LaCrosse	6,671,050	6,730,573	6,061,152	6,038,853	5,922,531	6,188,500	4,973,740
Lafayette	1,008,499	1,011,813	935,813	938,126	910,183	946,761	948,392
Langlade	1,298,387	1,365,956	1,254,161	1,257,477	1,223,537	951,408	953,651
Lincoln	1,554,626	1,521,987	1,404,764	1,409,515	1,368,495	1,742,033	1,744,134
Manitowoc	4,392,669	4,478,945	4,162,415	4,174,094	4,056,548	4,230,479	4,238,449
Marathon	5,888,002	5,920,330	5,400,634	5,420,914	5,281,063	5,521,750	5,533,836
Marinette	2,112,814	2,126,453	1,970,671	1,974,429	1,918,943	1,984,543	1,987,196
Marquette	779,572	786,646	704,268	706,037	686,162	713,189	714,425
Menominee	1,258,111	1,274,778	1,174,690	1,179,688	1,148,557	1,194,908	1,196,000

APPENDIX VI (continued)

Comparison of Calendar Year 1995 through 2001  
Community Aids Allocations

County	1995	1996	1997*	1998**	1999**	2000**	2001**
Milwaukee#	\$100,964,534	\$102,571,402	\$93,645,763	\$93,499,275	\$91,003,231	\$93,792,193	\$91,975,793
Monroe	2,195,958	2,227,108	1,990,787	1,999,681	1,948,427	2,035,820	2,040,173
Oconto	1,592,058	1,606,042	1,454,215	1,458,292	1,417,745	1,474,179	1,476,701
Oneida	1,671,497	1,675,155	1,581,509	1,587,273	1,546,416	1,620,479	1,624,140
Outagamie	7,359,364	7,441,165	6,794,371	6,807,088	6,609,634	6,854,428	6,865,136
Ozaukee	3,067,887	3,049,605	2,794,507	2,799,650	2,716,182	2,807,359	2,810,913
Pepin	694,390	694,495	646,692	649,311	630,099	654,470	655,397
Pierce	1,619,381	1,629,539	1,479,264	1,483,045	1,441,083	1,500,955	1,503,683
Polk	2,160,966	2,189,861	1,997,581	2,003,700	1,947,339	2,032,796	2,036,221
Portage	2,851,792	2,892,925	2,591,884	2,598,077	2,528,653	2,624,938	2,115,872
Price	974,085	968,520	901,799	906,049	880,794	912,129	913,366
Racine	12,323,019	12,485,154	11,335,895	11,370,602	11,074,613	11,560,093	11,583,265
Richland	1,313,737	1,330,080	1,234,302	1,238,486	1,202,545	1,243,704	1,245,098
Rock	10,385,180	10,600,685	9,630,387	9,663,457	9,399,661	9,815,329	9,833,852
Rusk	1,216,684	1,254,273	1,158,803	1,161,882	1,128,294	1,163,455	1,165,268
St. Croix	2,017,116	2,669,684	2,434,113	1,850,398	1,799,458	1,865,622	1,868,533
Sauk	2,535,959	1,350,561	1,225,198	2,442,768	2,375,980	2,481,317	2,486,171
Sawyer	1,372,255	1,955,233	1,776,480	1,198,765	1,194,484	1,236,138	1,237,571
Shawano	1,914,369	2,036,793	1,846,250	1,778,408	1,727,644	1,784,536	1,786,720
Sheboygan	5,856,221	5,830,567	5,324,466	5,335,664	5,180,747	5,381,936	5,390,939
Taylor	1,375,963	1,386,103	1,290,804	1,296,046	1,258,771	1,305,840	1,307,629
Trempealeau	1,784,651	1,796,247	1,662,344	1,666,524	1,616,537	1,671,207	1,673,355
Vernon	1,695,234	1,709,129	1,540,597	1,544,724	1,499,357	1,558,389	1,560,932
Vilas	989,127	989,463	944,709	945,889	919,345	954,657	956,021
Walworth	4,009,149	3,942,707	3,586,708	3,595,917	3,492,706	3,633,734	3,639,564
Washburn	943,791	1,019,034	955,355	957,851	930,716	960,511	961,977
Washington	4,128,959	4,095,698	3,755,038	3,760,244	3,649,997	3,776,305	3,781,861
Waukesha	12,874,849	13,020,344	12,188,780	12,204,060	11,840,848	12,252,919	12,269,786
Waupaca	2,314,873	2,321,915	2,129,436	2,133,392	2,073,271	2,148,467	2,151,692
Waushara	1,297,653	1,303,477	1,152,154	1,155,190	1,122,815	1,167,364	1,169,407
Winnebago	8,299,988	8,350,069	7,622,122	7,643,601	7,427,107	7,742,352	7,757,280
Wood	<u>4,202,171</u>	<u>4,219,547</u>	<u>3,857,711</u>	<u>3,874,634</u>	<u>3,773,081</u>	<u>3,943,281</u>	<u>3,952,066</u>
Total	\$328,073,464	\$331,912,900	\$303,385,069	\$303,127,990	\$295,471,847	\$306,520,801	\$302,293,645

\*Beginning in 1997, GPR and federal funding for child care was transferred to the Department of Workforce Development under provisions of 1995 Wisconsin Act 289.

\*\*In addition to the allocations identified, \$412,800 is distributed to American Indian tribes and bands for childcare for low-income families and additional foster care funds are distributed to counties for programs to assist the children and families.

#Allocation before \$38,792,200 reduction for Milwaukee County's child welfare services, beginning in calendar year 1998.

## APPENDIX VII

### 2001 Per Capita Community Aids Allocations

Rank	County	Per Capita Allocation*	Rank	County	Per Capita Allocation*
1	Menominee	\$252.61	37	Manitowoc	\$49.79
2	Florence	95.31	38	Dunn	49.78
3	Milwaukee	94.65	39	Winnebago	49.75
4	Crawford	90.03	40	Juneau	49.56
5	Pepin	89.83	41	Vilas	48.43
6	Forest	85.06	42	Sheboygan	47.76
7	Jackson	80.08	43	Adams	47.36
8	Sawyer	78.70	44	Kewaunee	47.06
9	Rusk	76.11	45	Sauk	46.60
10	Douglas	74.54	46	La Crosse	46.49
11	Iron	72.64	47	Oneida	46.43
12	Ashland	70.38	48	Marinette	46.13
13	Richland	69.48	49	Door	46.12
14	Taylor	66.44	50	Langlade	46.02
15	Buffalo	65.57	51	Brown	45.63
16	Rock	65.04	52	Shawano	45.57
17	Washburn	64.26	53	Iowa	45.29
18	Burnett	62.96	54	Green Lake	45.27
19	Trempealeau	62.79	55	Dane	45.21
20	Clark	61.91	56	Marathon	43.48
21	Racine	61.13	57	Oconto	43.43
22	Bayfield	60.65	58	Outagamie	42.93
23	Eau Claire	60.28	59	Waupaca	42.72
24	Lincoln	59.85	60	Pierce	42.57
25	Kenosha	59.33	61	Walworth	42.19
26	Lafayette	58.53	62	Fond Du Lac	42.04
27	Vernon	57.98	63	Green	41.74
28	Price	55.81	64	Columbia	41.44
29	Waushara	55.23	65	Jefferson	41.21
30	Polk	53.79	66	Dodge	39.34
31	Chippewa	53.54	67	Waukesha	34.50
32	Monroe	51.96	68	Ozaukee	34.38
33	Grant	51.64	69	Calumet	33.50
34	Barron	51.52	70	Washington	32.84
35	Marquette	51.45	71	Portage	31.26
36	Wood	50.71	72	St. Croix	<u>31.20</u>
				<b>State Total</b>	<b>\$56.63</b>

\*Based on calendar year 2001 allocations and 2000 population estimate.

**APPENDIX VIII**

**Additional Foster Care Funds  
Annual Allocations for 2000 and 2001**

County	2000	2001	County	2000	2001
Adams	\$57,469	\$64,711	Marathon	\$97,554	\$143,666
Ashland	59,385	68,487	Marinette	69,035	87,494
Barron	69,289	87,994	Marquette	55,450	60,734
Bayfield	58,577	66,895	Menominee	58,195	66,142
Brown	135,835	219,068	Milwaukee	0	0
Buffalo	56,407	62,620	Monroe	71,290	91,934
Burnett	56,910	63,610	Oconto	63,963	77,502
Calumet	62,537	74,693	Oneida	62,825	75,262
Chippewa	74,596	98,447	Outagamie	103,961	156,287
Clark	68,459	86,359	Ozaukee	68,218	85,885
Columbia	67,133	83,748	Pepin	53,485	56,865
Crawford	59,130	67,983	Pierce	63,652	76,891
Dane	171,464	289,248	Polk	68,033	85,520
Dodge	77,373	103,917	Portage	77,590	104,343
Door	60,996	71,659	Price	56,361	62,530
Douglas	74,466	98,191	Racine	138,582	224,479
Dunn	66,276	82,058	Richland	58,540	66,822
Eau Claire	93,724	136,123	Rock	118,241	184,413
Florence	52,513	54,950	Rusk	58,767	67,268
Fond du Lac	85,208	119,348	St. Croix	69,932	89,261
Forest	56,954	63,697	Sauk	71,477	92,302
Grant	73,129	95,557	Sawyer	59,980	69,657
Green	61,777	73,198	Shawano	67,254	83,985
Green lake	57,990	65,739	Sheboygan	87,173	123,219
Iowa	59,261	68,241	Taylor	60,202	70,096
Iron	52,339	54,607	Trempealeau	60,701	71,078
Jackson	59,517	68,745	Vernon	65,128	79,798
Jefferson	73,449	96,188	Vilas	59,157	68,037
Juneau	60,317	70,321	Walworth	75,707	100,635
Kenosha	115,209	178,442	Washburn	57,845	65,452
Kewaunee	57,353	64,482	Washington	79,744	108,586
La Crosse	93,410	135,505	Waukesha	138,646	224,606
Lafayette	57,625	65,019	Waupaca	67,875	85,208
Langlade	61,352	72,360	Waushara	60,010	69,716
Lincoln	61,934	73,506	Winnebago	102,224	152,866
Manitowoc	83,058	115,115	Wood	80,781	110,630
			<b>Total</b>	<b>\$5,200,000</b>	<b>\$6,800,000</b>

Note: Milwaukee County is not eligible to receive additional federal foster care funds since, under provisions of 1997 Wisconsin Act 27, DHFS is responsible for providing child welfare services in Milwaukee County.

## APPENDIX IX

### Clients Served and Expenditures Calendar Year 1999

#### By Target Group

	Clients Served	Percent of Total	Expenditures (in millions)	Percent of Total
Developmentally Disabled	35,718	8.8%	\$391.4	28.5%
Mental Health	88,645	21.9	301.3	21.9
Substance Abuse	55,879	13.8	63.0	4.6
Physically and Sensory Disabled	9,610	2.4	49.1	3.6
Delinquent and Status Offenders	36,883	9.1	207.6	15.1
Abused and Neglected Children	55,399	13.7	150.0	10.9
Children and Families	75,666	18.7	51.4	3.7
Adults and the Elderly	<u>46,412</u>	<u>11.5</u>	<u>160.4</u>	<u>11.7</u>
Total	404,212	100.0%	\$1,374.2	100.0%

#### By Standard Program Category Cluster

	Clients <sup>1</sup> Served	Percent of Total	Expenditures (in millions)	Percent of Total
Child Care	3,274	1.5%	\$9.9	0.7%
Supportive Home Care	21,501	3.5	123.9	9.0
Specialized Transportation and Escort	8,049	1.3	11.9	0.9
Community Prevention, Access and Outreach <sup>2</sup>	11,274	1.8	35.2	2.6
Community Living and Support Services	111,133	18.2	230.8	16.8
Investigation and Assessments	188,982	30.9	63.0	4.6
Community Support	7,409	12.0	46.2	3.4
Work Related and Day Services	24,843	4.1	90.5	6.6
Supported Employment	5,005	0.8	19.9	1.4
Community Residential Services	37,428	6.1	337.7	24.6
Community Treatment Services	157,302	25.7	166.9	12.1
Inpatient and Institutional Care <sup>3</sup>	33,348	5.5	187.2	13.6
Juvenile Correctional Institutes <sup>4</sup>	<u>2,000</u>	<u>0.3</u>	<u>51.1</u>	<u>3.7</u>
Total	611,548	100.0%	\$1,374.2	100.0%

<sup>1</sup>Some clients are included in more than one category. In addition to the clients identified here, 25,366 families members were served in 1999. Child care expenditures do not reflect work- or training-related child care.

<sup>2</sup>Number of clients served may not represent accurate number of clients served since counties are not required to report these expenditures on a client-specific basis.

<sup>3</sup>Includes Institutes for Mental Diseases.

<sup>4</sup>Estimate.

## APPENDIX X

### Community Aids Target Groups

*Developmentally Disabled.* Individuals who have a disability attributable to brain injury, cerebral palsy, epilepsy, autism, Prader-Willi Syndrome, mental retardation, or another neurological condition closely related to mental retardation, or requiring treatment similar to that required for mental retardation, which has continued, or can be expected to continue, indefinitely and constitutes a substantial handicap for the individual.

*Mental Health.* Individuals with chronic mental illness, including adults with serious and persistent mental illness and children and adolescents with severe emotional disturbances, each of whom are unable to independently perform essential personal and social roles appropriate to their age and require or receive treatment or supervision in order to carry out activities of daily living or to participate in community living.

*Substance Abuse.* Individuals who use alcohol and/or other chemical substances which have mind altering effects to the extent that it interferes with or impairs physical health, psychological functioning, or social or economic adaptation, including occupational or educational performance and person or family relations. This group also includes a person whose use of alcohol and or other substances has resulted in a conviction for operating a motor vehicle while intoxicated, or a Department of Transportation referral for an assessment to determine the existence of a substance abuse disability.

*Physically or Sensory Disabled.* Individuals, under the age of 65, who have a physical disability which impairs their mobility, are blind or visually impaired, or are deaf or hearing impaired and receive services for the purpose of assisting them to utilize their abilities, achieve their maximum potential in terms of

level of functioning and independence in social roles and fully access and participate in community life.

*Delinquents or Status Offenders.* Delinquent children include juveniles referred to court intake due to an allegation of delinquency, or found to be delinquent as defined under s. 938.02 (3m) of the statutes. Status offenders are those juveniles alleged to be in need of protection or services under s. 938.13 due to any of the following: (a) parental or guardian petition to control the juvenile; (b) truancy from school; (c) the juvenile is a school drop-out; (d) truancy from home; and (e) the juvenile under 10 years of age commits a delinquent act.

*Abused and Neglected Children.* A child who is, or is alleged to be, abused or neglected, as defined in s. 48.981 (1)(a), or is threatened with abuse or neglect. This definition includes physical or sexual abuse, neglect or emotional damage.

*Children and Family.* A child or family member that has service needs not specified in the other target groups.

*Adults and the Elderly.* Adults or elderly individuals who have service needs not specified in other target groups.